



City of Huntington
Community Development
& Redevelopment

300 Cherry Street, Huntington, IN 46750
Ph: (260) 356-5146 Fax: (260) 454-5211
www.huntington.in.us

RESIDENTIAL DWELLING ADDITION BUILDING PERMIT / IMPROVEMENT LOCATION PERMIT APPLICATION

DATE APPLIED: _____ PERMIT NO: _____
DATE ISSUED: _____ RECEIPT NO: _____

Department Use Only

Parcel #: _____ Township: _____
Subdivision: _____ Section/Phase: _____ Lot #: _____ Zoning: _____

Address of Construction Activity: _____

P R O P E R T Y	O W N E R	Name: _____	
		Mailing Address: _____	
		City/State/Zip Code: _____	Ph: _____

Individual / Contractor Responsible for Construction Activity:

Building Contractor: _____
Name Address Phone

Concrete Contractor: _____
Name Address Phone

Electrical Contractor: _____
Name Address Phone

Plumbing Contractor: _____
Name Address Phone

Type: Bedroom (No. _____) Bathroom Kitchen Family/Living Room Dining Room 4-Season Room
 Attic Storage/Dormers Utility/Mud Room Attached Garage Other _____

Intended Use: _____ **Foundation:** Basement Slab Crawlspace (1 2 3) Post Hole

Construction: Wood Frame Steel Masonry Pole **Dimensions:** _____' - _____" X _____' - _____"

Height of Structure: _____' - _____" (at tallest point) **Roof:** Truss Rafter **Roof Pitch:** _____/12

Sq. Footage: Basement _____ 1st Fl _____ 2nd Fl _____ 3rd Fl _____ Att. Garage _____ Covered Porch _____

Any Electrical: Yes (separate permit required) No **Any Plumbing:** Yes (separate permit required) No

Any Decks Larger (than 3' x 3'): Yes (separate permit required) No

Est. Cost of Construction: \$ _____ **Est. Date of Completion:** _____/_____/_____

I hereby certify that I have the authority to make the foregoing application; that the application and accompanying plans/documentation are correct; and that the Department is hereby authorized to enter the premises to perform required inspections; and that any structure will not be used or occupied until a Certificate of Occupancy has been issued. I further acknowledge that the violation of applicable codes and ordinances may result in the assessment of fines and penalties.

Department Use Only

Permit Fee

Permit Fee: \$ _____
Other: _____ \$ _____
Total Fees: \$ _____

Applicant Signature Printed Name Date

Approved by: _____

Department Representative Date

Comments/Conditions: _____

THE FOLLOWING INFORMATION, IF APPLICABLE, MUST BE SUBMITTED WITH THE BUILDING/IMPROVEMENT LOCATION PERMIT APPLICATION:

1. Site plan of the property showing:
 - a. All property lines and dimensions
 - b. All streets, alleys, and other rights-of-ways adjacent to the site
 - c. The location of all recorded easements
 - d. The location of all utility lines (overhead and underground)
 - e. The location of all County Regulated Legal Drains (both open ditches and tiles)
 - f. All parking areas designated for off-street parking
 - g. All existing and proposed structures
 - h. The setbacks of all existing and proposed structures
 - i. The height, width, and depth of proposed structures
2. Detailed floor plans of the proposed addition.
3. Residential Dwelling Addition Cross Section sheet (if over 200 Sq. Ft. in size)
4. For any property serviced by a septic system, residential addition permit applications for bedroom additions must be accompanied by written verification from the Huntington County Department of Health, verifying that the existing septic system is capable of such addition. The Department of Health is located in the Courthouse Annex at 354 N. Jefferson Street; (260) 358-4831.

PLEASE NOTE THE FOLLOWING REQUIREMENTS WHICH MAY APPLY:

1. Setbacks must be maintained from all property lines; you may need to join two or more parcels prior to permit approval.
2. Construction must be at least 10' from any water well or component of a septic system.
3. Other permits may be required for the following: Electrical permit, Plumbing permit, Accessory structure permit, Fence permit.
4. Electrical permits may only be obtained by an electrician licensed by Huntington County, or the deeded owner if residing at the home.
5. Plumbing permits may only be obtained by a state licensed plumbing contractor, or the deeded owner if residing at the home.

IMPORTANT INSPECTION INFORMATION

1. Inspections may be scheduled by calling the Department at (260) 356-5146 during normal business hours 8:00 am - 4:30 pm Monday through Friday (except holidays). The Department does **NOT** accept inspection requests by email, fax, or voicemail. You do not need to speak to an inspector to schedule an inspection, any member of the staff can assist you in scheduling.
2. Concrete inspections (footer, post hole, foundation, basement walls and slab) require a minimum of 4-hours notice. All other inspections require a minimum of 24-hours notice.
3. Failure to call for a required inspection will result in the assessment of fines/penalties. You may also be required to undo already completed work so that code compliance may be verified by the inspector.
4. If an inspection is failed/denied by the inspector, a re-inspection fee may be assessed and you will be required to schedule a new inspection appointment.
5. Payment of any fines/penalties/re-inspection fees must be paid to the Department prior to any other inspections being scheduled. Payment is required by cash or check only. The inspectors do not and can not accept payment of these assessed fees.
6. The following inspections (when required as marked on your yellow inspection card) are due at the following stages of construction:
 - a. Footer/Post Holes: Before pouring concrete or setting posts
 - b. Foundation/Crawlspace: Walls complete, anchor bolts in place, foundation wall insulated, sump pit installed & accessible, approved vapor barrier, and ventilation (if crawlspace)
 - c. Basement Walls: Once forms and reinforcement are in place and prior to the placement of concrete
 - d. Under Slab Plumbing: Before plumbing is covered, leave all piping exposed
 - e. Slab: Prior to pouring concrete
 - f. Slab, Garage: Prior to pouring concrete
 - g. Electrical, Rough: Before enclosing walls with wall board, insulation, or covering; and before any electrical wiring or connections
 - h. Plumbing, Rough: Before enclosing walls with wall board or insulation
 - i. Framing: Before enclosing walls with wall board, insulating, or installing siding or soffit but after installing fire-blocking
 - j. Final: Prior to occupying or utilizing the structure
 - k. Other: Please consult with the Inspector or Department as to the specific requirements of this inspection

THE ISSUANCE OF A PERMIT SHALL NOT AUTHORIZE THE VIOLATION OF ANY PROVISION OF THE BUILDING CODE, ELECTRICAL CODE, PLUMBING CODE, ZONING CODE, OR ANY OTHER APPLICABLE CODE OR REGULATION.

Residential Dwelling Addition Cross Section

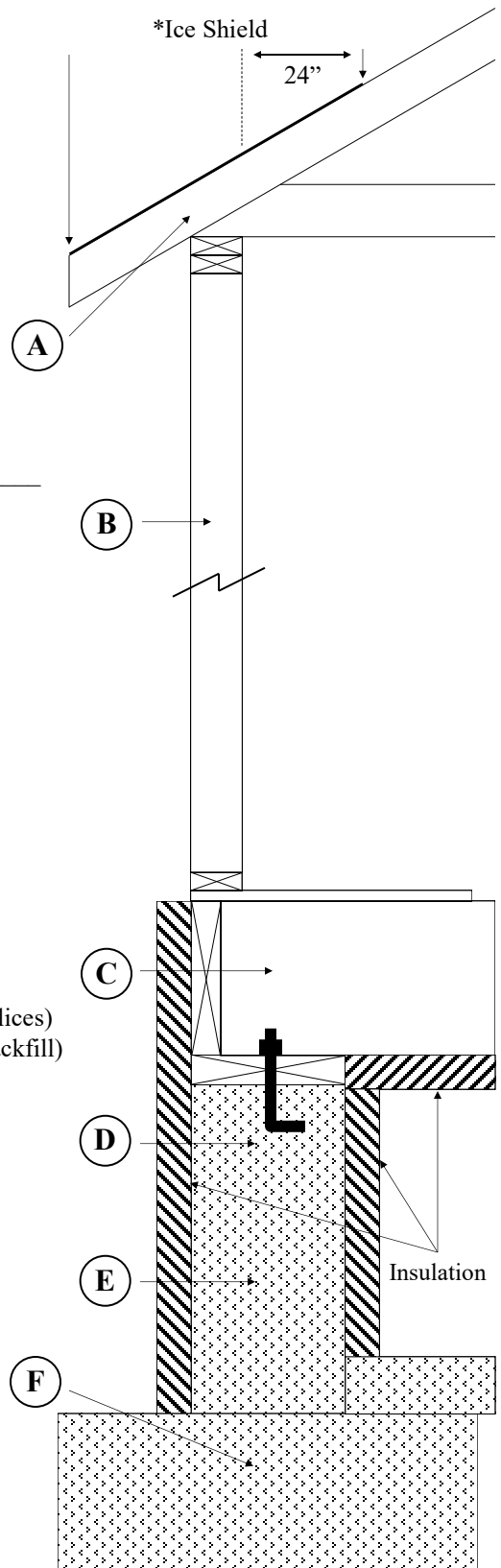
Instructions: Fill in all sections relevant with the exact information that applies to your projects and submit with your permit.

Address: _____

A. Roof System

Pitch: ____/12 (ex. 4/12 or 6/12)
 Roof type: ____ Gable ____ Hip ____ Shed ____ Other: ____
 Covering: ____ Shingles ____ Metal ____ Other: ____
 Truss or rafter spacing O.C.: ____
 Trusses installed: ____ Yes ____ No (if no, answer the following)
 Rafter size: ____ X ____
 Ridge board size: ____ X ____
 Ceiling joist size: ____ X ____
 Ceiling joist span: ____

*Ice shield is required from eaves edge to at least 24" inside exterior wall line



B. Walls

Stud framing size: ____ X ____ (ex: 2x4 or 2x6)
 Stud spacing O.C.: ____
 Exterior wall sheathing (describe) _____
 Exterior wall covering: ____ Vinyl siding ____ Aluminum Siding
 ____ Brick ____ Other: _____

C. Floor System

Joist type: ____ Dimensional lumber ____ I-Joist
 Joist size: ____ X ____
 Joist spacing O.C.: ____
 Joist span: ____
 Beams used: ____ Yes (type: _____) ____ No

D. Foundation

Type (check all that apply):
 ____ Slab on grade (minimum 3.5" thick slab required with vapor barrier)
 ____ Crawlspace # ____ (3 options available, see back of this sheet)
 ____ Basement - Wall height: ____ Wall thickness: ____
 Anchor bolts:
 Length (min. 10"): ____
 Spacing O.C.: ____ (slab & crawlspace: every 6' and within 12" of ends/splices)
 Spacing O.C.: ____ (basement: determined by the amount of unbalanced backfill)

E. Basement Walls (if applicable)

Basement to be finished: ____ Yes ____ No
 Insulation: ____ Basement walls (____ Inside or ____ Outside)
 ____ Basement Ceiling
 Plumbing to be installed:
 ____ Sump pump
 ____ Sewage ejection pump (if yes, number of plumbing fixtures: ____)
 Basement bedrooms (now or in the future): ____ Yes (# ____) No ____

F. Footings

Type: ____ Trenched ____ Spread
 Depth: ____ (minimum 36" below undisturbed grade) / Width: ____

Approved Crawlspace Options

Crawlspace Option #1: Vented Crawlspace

Floor Insulated to R-25

Duct Insulated: R-4.2 (N 1104.3)

HVAC Duct

Grade

Vent required within 4' of each corner and 1 sq. ft. of net vent opening for every 1,500 sq. ft. of crawlspace area when vapor barrier installed, or space may be mechanically ventilated at a rate of 1.0 CFM for each 50 sq. ft. of crawlspace area.

6 mil Vapor Barrier

Crawlspace Option #2: Non-Vented Crawlspace

End of joist space insulated to R-19

HVAC Duct

Grade

Wall insulated from floor joist to grade level and an additional 24" vertically, horizontally, or a combination of both

Not insulated and no openings into crawlspace

Electrical receptacle and 16" X 16" hard surface pad for dehumidifier

24"

6 mil Vapor Barrier

Crawlspace Option #3: Conditioned Crawlspace

End of joist space insulated to R-19

Return Duct

Supply Duct

Grade

Wall insulated to R-7. Insulation must be compatible with interior atmosphere (if blue-board, must be covered with drywall or other approved rated material)

Air Circulated from HVAC duct's through crawlspace at 1 CFM for every 50 sq. ft.

6 mil Vapor Barrier under minimum 2" concrete slab

**All options require that crawlspace floor (gravel or concrete) be sloped to the required sump pit*